PAGE 1 / 12

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	For Other Than An Auth	norized Committee	Office	Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
PLS FINANCIAL SVCS IN	NC GOOD NEIGHBOR P	POLITICAL ACTION COM	MITTE (PLS GOOD	NEIGHBOR PAC)
ADDRESS (number and street) Check if different than previously	1 SOUTH WACKER DRIVE 36TH FLOOR CHICAGO		, IL , 606	06
reported. (ACC) 2. FEC IDENTIFICATION N		Y 🛦	STATE A	ZIP CODE ▲
C C00450189	3. IS	THIS NEW (N) OR	× AMENDEI)
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: X April 15 Quarterly Report (Compared to the content of	Report Due On: Mar 2 Q1) (c) 12-Day PRE-Election Report for the: Q3) YE) (d) 30-Day POST-Election Report for the:	General (30G)		(Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
5. Covering Period 0/	M / D D / Y Y Y			016
I certify that I have examined the Type or Print Name of Treasure	•	my knowledge and belief it is	rue, correct and comp	lete.
Signature of Treasurer Robe	ert Wolfberg	[Electronically Filed]		2016
NOTE: Submission of false, erron	neous, or incomplete information	may subject the person signing	this Report to the pena	Ities of 2 U.S.C. §437g.
Office Use Only			FE	C FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC)

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		2631.66
	(b) Cash on Hand at Beginning of Reporting Period	2631.66	
	(c) Total Receipts (from Line 19)	5675.00	5675.00
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8306.66	8306.66
7.	Total Disbursements (from Line 31)	2047.44	2047.44
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6259.22	6259.22
	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	5540.00	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC)

I. Receipts tions (other than loans) From: viduals/Persons Other n Political Committees Itemized (use Schedule A) Unitemized	COLUMN A Total This Period 630.00 5045.00	COLUMN B Calendar Year-to-Date
viduals/Persons Other In Political Committees Itemized (use Schedule A) Unitemized TOTAL (add		
n Political Committees Itemized (use Schedule A) Unitemized TOTAL (add		
Unitemized		
Unitemized		
TOTAL (add	5045.00	
· · · · · · · · · · · · · · · · · · ·		5045.00
	5675.00	5675.00
tical Party Committees	0.00	0.00
er Political Committees ch as PACs)	0.00	0.00
als to Line 33, page 5)	5675.00	5675.00
	0.00	0.00
ommittees	0.00	0.00
s Received	0.00	0.00
payments Received	0.00	0.00
To Operating Expenditures	7	
s, Rebates, etc.)		
otals to Line 37, page 5)	0.00	0.00
of Contributions Made		
al Candidates and Other		
Committees	0.00	0.00
ederal Receipts		
	0.00	0.00
		, , , , , , , , , , , , , , , , , , , ,
m Schedule H3)	0.00	0.00
- F - 1 - ((0.00	0.00
Funds (from Schedule H5)	0.00	0.00
Transfers (add 18(a) and 18(b))	0.00	0.00
	ch as PACs)	th as PACs)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements		Total This Period		
	perating Expenditures: -) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
(b	. 11			
	Expenditures	47.44	47.44	
(c	, , , , , , , , , , , , , , , , , , , ,	47.44	47.44	
22. Tı	(add 21(a)(i), (a)(ii), and (b))▶ ransfers to Affiliated/Other Party	77.44	11.11	
Ç	ommittees	0.00	0.00	
F	ontributions to ederal Candidates/Committees nd Other Political Committees	2000.00	2000.00	
	dependent Expenditures	0.00		
25. C	se Schedule E)oordinated Party Expenditures	0.00	0.00	
(2	. U.S.C. §441a(d)) lse Schedule F)	0.00	0.00	
,0				
26. Lo	pan Repayments Made	0.00	0.00	
7 I	pans Made	0.00	0.00	
	efunds of Contributions To:			
(6	Than Political Committees	0.00	0.00	
(h) Political Party Committees	0.00	0.00	
(b (c		7		
	(such as PACs)	0.00	0.00	
(c) Total Contribution Refunds			
(0	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
	i			
29. O	ther Disbursements	0.00	0.00	
80. F	ederal Election Activity (2 U.S.C. §431(20))			
(a	a) Allocated Federal Election Activity			
	(from Schedule H6) (i) Federal Share	0.00	0.00	
	(i) i duciai oliaic		7 7	
	(ii) "Levin" Share	0.00	0.00	
(b	Federal Election Activity Paid Entirely With Endoys Funds	0.00	0.00	
(c	With Federal Funds	0.00	0.00	
,,	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
1 T/	otal Disbursements (add Lines 21(c), 22,			
	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	2047.44	2047.44	
	otal Federal Disbursements			
	ubtract Line 21(a)(ii) and Line 30(a)(ii)	2047.44	2047.44	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	5675.00	5675.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5675.00	5675.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	47.44	47.44
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	47.44	47.44

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

	FOF	R LINE	NU	MBER	:	PAGE	Ξ	6 C)F	12
Use separate schedule(s)	(che	ck only	or	ne)						
for each category of the Detailed Summary Page	X	11a		11b		11c		12		
		13		14		15		16		717

or for commercial purposes, other than using	the name and address of any political committee t	
NAME OF COMMITTEE (In Full) PLS FINANCIAL SVCS INC GOOD	NEIGHBOR POLITICAL ACTION COMMIT	TE (PLS GOOD NEIGHBOR PAC)
Full Name (Last, First, Middle Initial) Aaron Caid		Date of Receipt
Mailing Address 1 S Wacker 36th Floor	7: 0.1	03 22 7 2016
City Chicago	State Zip Code IL 60606	Transaction ID : SA11AI.4250
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 60.00
Name of Employer	Occupation	Memo Item
PLS Financial Services	Manager	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) B. Mark McNall	•	Date of Receipt
Mailing Address 1 S Wacker 36th Floor City	State Zip Code	02 24 2016
Chicago	IL 60606	Transaction ID : SA11AI.4205 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	Memo Item
PLS Financial Services	Manager	Contribution
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mark McNall		Date of Receipt
Mailing Address 1 S Wacker 36th Floor		03 22 2016
Chicago	State Zip Code IL 60606	Transaction ID : SA11AI.4252 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer	Occupation	Memo Item
PLS Financial Services	Manager	Contribution
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional) >	310.00
	ber only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:	PAGE	7 OF	12
Use separate schedule(s)	(check only one)			
for each category of the Detailed Summary Page	X 11a 11b	11c	12	
	13 14	15	□ 16	717

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC) Full Name (Last, First, Middle Initial) James Patterson Date of Receipt Mailing Address 1 S Wacker 03 2016 22 City State Zip Code Transaction ID: SA11AI.4253 Chicago IL 60606 Amount of Each Receipt this Period FEC ID number of contributing C 80.00 federal political committee. Memo Item Name of Employer Occupation Contribution PLS Financial Services Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify) Full Name (Last, First, Middle Initial) B. Matthew M Swentkofske Date of Receipt Mailing Address 1 S Wacker Drive 36th Floor 03 22 2016 City State Zip Code Transaction ID: SA11AI.4293 IL Chicago 60606 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation **PLS Financial Services** Contribution Manager Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 240,00 Full Name (Last, First, Middle Initial) c. Matthew M Swentkofske Date of Receipt Mailing Address 1 S Wacker Drive 22 36th Floor 03 2016 City State Zip Code Transaction ID: SA11AI.4331 IL Chicago 60606 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Memo Item Name of Employer Occupation Contribution PLS Financial Services Manager Receipt For: Aggregate Year-to-Date ▼ Primary General 280.00 Other (specify)

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

	FOR LIN	E NUMBE	R:	PAGE	: {	8 (IJF
Use separate schedule(s)	(check o	nly one)					
for each category of the Detailed Summary Page	X 11a	11b		11c		12	
	13	14		15		16	Г

12

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

or for commercial purposes, other than using	the name and address of any political committee	to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PLS FINANCIAL SVCS INC GOOD	NEIGHBOR POLITICAL ACTION COMMIT	TE (PLS GOOD NEIGHBOR PAC)
Full Name (Last, First, Middle Initial) Daniel Wolfberg Mailing Address 1 S Wacker 36th Floor City Chicago FEC ID number of contributing federal political committee. Name of Employer PLS Financial Services Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial)	State Zip Code IL 60606 C Occupation Manager Aggregate Year-to-Date ▼	Date of Receipt 03 22 2016 Transaction ID: SA11AI.4256 Amount of Each Receipt this Period 80.00 Memo Item Contribution
Address 1 S Wacker 36th Floor City Chicago FEC ID number of contributing federal political committee. Name of Employer PLS Financial Services Receipt For: Primary Other (specify) ▼	State Zip Code IL 60606 C Occupation Treasurer Aggregate Year-to-Date ▼ 280.00	Date of Receipt 03 22 2016 Transaction ID : SA11AI.4257 Amount of Each Receipt this Period 80.00 Memo Item Contribution
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional)	<u> </u>	160.00
TOTAL This Period (last nage this line numb	ner only)	630.00

Core such category of the bottlessed of the control of the commercial purposes, other than using the name and address of any political committee to selicit contributions from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions for for commercial purposes, other than using the name and address of any political committee to selicit contributions from such committee. NAME OF COMMITTEE (IP LIN)	SCHEDULE B (FEC Form 3X)	Han announts of the Co.	FOR LINE I	NUMBER: PAGE 9 OF 12
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC) Full Name (Last, First, Middle Initial) CRECINSHAW FOR CONGRESS CAMPAIGN Mailing Address 7235 BONNEVAL RD STE 228 City Slate Zip Code JACKSONVILLE FL 32256 Purpose of Disbursement Contribution Candidate Name ANDER CRENSHAW Disbursement For: 2016 Senate President State: FL District: 04 Full Name (Last, First, Middle Initial) DEMOCRATS WIN SEATS (DWS PAC) Mailing Address PO BOX 83142 City City State: Zip Code GATHERSBURG MD 20883 Furpose of Disbursement Contribution Candidate Name Office Sought: House Senate President State: Zip Code Category/Type Memo Item Transaction ID: SB23.4335 Amount of Each Disbursement this Period Office Sought: House Disbursement Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Amount of Each Disbursement this Period Category/Type Memo Item Category/	ITEMIZED DISBURSEMENTS		21b	22 🗶 23 🔲 24 📗 25 📉 26
NAME OF COMMITTEE (in Full) PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC) PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC) Full Name (Last, First, Middle Initial) CRENSHAW FOR CONGRESS CAMPAIGN Mailing Address 7235 BONNEVAL RD STE 228 City JACKSOWNILE FL 32256 Plagpage of Disbursement Contribution Candidate Name Other (specify) Amount of Each Disbursement Other (specify) Transaction ID: SB23.4337 Amount of Each Disbursement Other (specify) Date of Disbursement Transaction ID: SB23.4337 Amount of Each Disbursement Other (specify) Date of Disbursement Transaction ID: SB23.4337 Amount of Each Disbursement Other (specify) Transaction ID: SB23.4335 Transaction ID: SB23.4335 Amount of Each Disbursement Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Category' 1000.00 Memo Item Date of Disbursement this Period Date of Disbursement this Pe				
A CRENSHAW FOR CONGRESS CAMPAIGN Mailing Address 7235 BONNEVAL RD STE 228 City JACKSONVILLE FL 32256 Purpose of Disbursement Contribution Candidate Name ANDER CRENSHAW AND JOHN ANDER CRENSHAW ANDER	NAME OF COMMITTEE (In Full)	•		
Mailing Address 7235 BONNEVAL RD STE 228 City State Zip Code JACKSONVILLE FL 32256 FPurpose of Disbursement Contribution Candidate Name ANDER CRENSHAW Office Sought: House Senate President Contribution Candidate Name ANDER CRENSHAW Office Sought: Senate President Contribution Candidate Name ANDER CRENSHAW Office Sought: A House Senate President Contribution Candidate Name Category/Type Disbursement For: 2016 Memoittem Date of Disbursement Office Sought: House Senate President Contribution Candidate Name Category/Type Transaction ID: SB23.4337 Amount of Each Disbursement Office Sought: House Senate President Contribution Candidate Name Category/Type Transaction ID: SB23.4337 Amount of Each Disbursement Category/Type Transaction ID: SB23.4337 Amount of Each Disbursement Category/Type Transaction ID: SB23.4337 Transaction ID: SB23.4337 Amount of Each Disbursement Office Sought: House Senate President Category/Type Office Sought: House City State: Zip Code Purpose of Disbursement Candidate Name Category/Type Office Sought: House Category/Type Of	_	_		
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JACKSONVILLE Purpose of Disbursement Contribution Cardidate Name ANDER CRENSHAW Office Sought:	_			
Purpose of Disbursement Contribution Candidate Name ANDER CRENSHAW Office Sought: House Senate President State Elegony Transaction ID : SB23.4335 House Senate Primary General	•			Transaction ID : SB23.4337
Candidate Name ANDER CRENSHAW Office Sought:	57.57.15 57.17.222	32250		
ANDER CRENSHAW Office Sought: House Senate Prisident State: FL Disbursement For: 2016 Mailing Address PO BOX 83142 City State Zip Code GATHERSBURG MD 20883 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate Prisident Disbursement For: 2016 Senate President State: Zip Code GATHERSBURG MD 20883 Purpose of Disbursement Contribution Candidate Name Office Sought: House Senate Primary General Primary General President Disbursement City State Zip Code MD 20883 Transaction ID: SB23.4335 Amount of Each Disbursement this Period Memo Item Amount of Each Disbursement this Period Date of Disbursement Category' Type Office Sought: House Disbursement For: Gategory' Type Office Sought: H	Contribution			Amount of Each Disbursement this Period
Office Sought:				1000.00
Senate President Other (specify) State: FL District: 04 Full Name (Last, First, Middle Initial) DEMOCRATS WIN SEATS (DWS PAC) Mailing Address PO BOX 83142 City State Zip Code GATHERSBURG MD 20883 Purpose of Disbursement Contribution Candidate Name Office Sought: House President District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: Amount of Each Disbursement This Period Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General Other (specify) State: District: Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement General Primary General Primary General Primary General Disbursement This Period Category/ Type Office Sought: House Disbursement For: General Primary General Primary General Disbursement This Period Subtotal of Disbursements This Page (optional).		pent For: 2016	Туре	
Full Name (Last, First, Middle Initial) Democrats win Sears (DWS PAC) Mailing Address PO BOX 83142 City	Senate	Primary General		Memo Item
Date of Disbursement Mailing Address PO BOX 83142 City State Zip Code GAITHERSBURG MD 20883 Purpose of Disbursement Contribution Candidate Name Office Sought: House Primary General Primary General Disbursement City State Zip Code Purpose of Disbursement this Period Type Disbursement For: Memo Item Date of Disbursement this Period Amount of Each Disbursement this Period Date of Disbursement this Period Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Amount of Each Disbursement this Period Amount of Each Disbursement Type Memo Item Date of Disbursement Type Office Sought: House Disbursement For: Memo Item Date of Disbursement Type Date	State: FL District: 04			
City GAITHERSBURG MD 20883 Purpose of Disbursement Candidate Name City Senate Primary State: City State District: Full Name (Last, First, Middle Initial) City State: City State Disbursement Contribution Candidate Name City State: District: Full Name (Last, First, Middle Initial) City State: City State City Senate Primary General Other (specify) Memo Item Amount of Each Disbursement this Period Memo Item Amount of Each Disbursement this Period Category/ Type Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: State: Disbursements Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period		PAC)		
GAITHERSBURG MD 20883 Purpose of Disbursement Contribution Candidate Name Category/ Type Office Sought: House Primary General District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Memo Item Amount of Each Disbursement this Period Amount of Each Disbursement this Period Amount of Each Disbursement Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substitute Disbursements This Page (optional)	Mailing Address PO BOX 83142			
Contribution Candidate Name Category/ Type Memo Item Date of Disbursement this Period Category/ Type Date of Disbursement City State City State City State City State City State City State City Category/ Type Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type Office Sought: House Senate Primary General Category/ Type Office Sought: Category/ Type Office Sought: Senate Primary General Other (specify) Memo Item Memo Item Subsursement this Period Category/ Type Memo Item Subsursement this Period Category/ Type Office Sought: Subsursement This Page (optional)	GAITHERSBURG			Transaction ID : SB23.4335
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substortal of Disbursements This Page (optional)	•			Amount of Each Disbursement this Period
Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)	Candidate Name			
Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substitute (approximately properties) Substitute (approximately primary General Other (specify)) Substitute (approximately primary General Other (specify)) 2000.00	Senate President	Primary General		Memo Item
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Date of Disbursement Amount of Each Disbursement this Period Memo Item 2000.00				
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	,			
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Subtotal of Disbursements This Page (optional)	Mailing Address			
Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substruct: Memo Item Amount of Each Disbursement this Period Memo Item 2000.00	City	State Zip Code		
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ Subtotal of Disbursements This Page (optional)	Purpose of Disbursement			
Office Sought: House Senate Primary General Other (specify) State: District: Memo Item Substituting Substitution President State: District: Memo Item	Candidate Name			Amount of Each Disbursement this Period
SOBTOTAL OF DISDUISEMENTS THIS Tage (optional)	Senate President	Primary General	Турс	
2000.00	SUBTOTAL of Disbursements This Page (optional)			2000.00
				2000.00

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 10 OF 12 FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full) Transaction ID: SC/10.4348 PLS FINANCIAL SVCS INC GOOD NEIGHBOR POLITICAL ACTION COMMITTE (PLS GOOD NEIGHBOR PAC) LOAN SOURCE Full Name (Last, First, Middle Initial) Election: Memo Item Matthew M Swentkofske Primary General Mailing Address 1 S Wacker Drive Other (specify) 36th Floor ZIP Code 60606 City Chicago State IL Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 190.00 0.00 190.00 **TERMS** Date Incurred Date Due Interest Rate Secured: 2014 11 Yes X No % (apr) List All Endorsers or Guarantors (if any) to Loan Source 1. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 2. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City State ZIP Code Guaranteed Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount City ZIP Code State Guaranteed Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount ZIP Code City State Guaranteed Outstanding: 190.00 SUBTOTALS This Period This Page (optional)..... TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 11 OF 12 FOR LINE 13 OF FORM 3X

LOAN SOURCE Full Name (Las Daniel Wolfberg	t, First, Mid	dle Initial)	☐ Memo Ite	Primary		
Mailing Address 1 S Wacker 36th Floor			General Other (specify) ▼			
City Chicago		State IL ZIP C	Code 60606			
Original Amount of Loan		Cumulative Payment 1		Balance Outstanding at Close of This Period		
26	75.00		0.00	2675.00		
TERMS Date Incurred		Date Du		t Rate Secured:		
11 21 2014		/ D D / Y	Y	% (apr) Yes X No		
List All Endorsers or Guarantors	s (if any) to	Loan Source				
1. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
2. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
3. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
4. Full Name (Last, First, Middle	Initial)		Name of Employer			
Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:			
BTOTALS This Period This Page	(optional)			2675.00		

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 12 FOR LINE 13 OF FORM 3X

ME OF COMMITTEE (In Full)				on ID : SC/10.4	
S FINANCIAL SVCS INC GOOD NEIGH	BOR POLITICAL AC	TION COMMITTE ((PLS GOO	D NEIGHBO	R PAC)
LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)		Fled	ction:	
Robert Wolfberg	Memo Ite	eiii	Primary		
resort wonserg			General		
Mailing Address 1 S Wacker				Other (specify)	· -
Mailing Address 1 S Wacker 36th Floor				Cirior (opcony)	•
City Chicago	State IL ZIP C	ode 60606			
	Cumulative Payment		Polones C	Outstanding at (Class of This Day
Original Amount of Loan	Cumulative Payment	Date	balance C	Juistanding at t	Close of This Pe
2675.00		0.00			2675.00
TERMS	Data Du	latava	at Data		Caarradi
Date Incurred	Date Du	e intere	est Rate	_	Secured:
11 21 2014	W - W / B - B /			% (apr)	Yes X
ist All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)		Name of Employer			
,					
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed			
		Outstanding:	,		
2. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
		Amount			
City State	ZIP Code	Guaranteed Outstanding:			
			,	,	
3. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occuration			
Mailing Address		Occupation			
		A			
City State	ZIP Code	Amount Guaranteed			
State	_11 OUG	Outstanding:			
1. Full Name (Last, First, Middle Initial)		Name of Employer			
Mailing Address		Occupation			
-					
		Amount			
City State	ZIP Code	Guaranteed			
		Outstanding:	,	,	
BTOTALS This Period This Page (optional).					2675.00
			-	7 7	
TALS This Period (last page in this line only	/)				5540.00
, p				7	